

THE MONITOR

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Understanding Blood Sugar Levels

By Laura Nelson, M.D., former Associate Medical Director and Quality Management Administrator (Dr. Nelson is now with the Division of Behavioral Health Service)

Numerous medications are now known to potentially contribute to abnormal glucose levels, including Risperdal, Zyprexa, Seroquel, Geodon, Abilify, and Clozaril. It is important for caregivers to be able to recognize potential symptoms of high and low blood sugar. The client should see a physician as soon as possible, if symptoms are observed.

Hypoglycemia: low blood sugar

Symptoms: faintness, weakness, tremor, heart palpitations, sweating, hunger, nervousness, headache, confusion, visual changes, unsteady gait, personality changes. Many of these symptoms can also be observed with anxiety as well. Hypoglycemia can lead to seizures.

Hyperglycemia: high blood sugar

Symptoms: increased frequency of urination and increased thirst are the primary signs of high blood sugar. Very high blood sugar is extremely dangerous and can initially lead to nausea and vomiting, but can progress to coma and even death. Over time, high blood sugar leads to problems with kidneys, vision, vascular disease, and altered sensation in extremities (hands and feet).

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Home and Community-Based Services (HCBS) Quality

By Jan Cawthorne, Data Analyst and Technical Assistance Coordinator

The HCBS Quality Framework is a quality improvement tool that has been explored in prior issues. In this issue the fourth focus area, “Participant Rights and Responsibilities” will be addressed. Further information can be found at www.cms.hhs.gov/medicaid/waivers/quality.asp (Click on “Quality Framework” and the click on Framework.)

The desired outcome for **Participant Rights and Responsibilities** is that “*participants receive support to exercise their rights and in accepting personal responsibilities.*” Consider basic human and civic rights. Are consumers informed of their rights and do they have opportunities to freely exercise those rights? Do they know how to make complaints and grievances and are those grievances resolved in a timely manner? Do

The Monitor Bulletin
addresses quality management and program monitoring topics.

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(Continued from page 1—Home and Community Based Services) you provide training and support to help consumers exercise their own decision-making authority? Does your organization have systems to track and trend complaints and grievances?

Provider agencies are encouraged to look at their current quality management systems to ensure the focus area of Participant Rights and Responsibilities is included.

Serious Incidents—Reporting Requirements



By Shannon LaRance, Incident Management Coordinator



Serious Incidents must be reported. A Serious Incident is a serious and extraordinary event involving an individual, a facility or employed/contracted personnel to the extent that the event poses a threat of immediate death or severe injury to a person, substantial damage to individual or state property, and/or widespread interest in the news media.

All medical professionals, psychologists, social workers, support coordinators, peace officers and others who have the responsibility for the care of a child or a vulnerable adult, including direct care staff, are designated by law as mandatory reporters to the police, Adult Protective Services (APS) or Child Protective Services (CPS) and to the Division within 24 hours.

If the incident is a life-threatening emergency, call 911 first and then make the report. Take any necessary emergency actions to insure the victim's health and safety. When the situation is under control and all appropriate protective agencies are notified, report the Serious Incident to the Division and write it up as soon as possible but no later than 24 hours after the incident.

Reporting timelines are very important including the time for the Division to report incidents to AHCCCS. In the tracking and trending of incident reports, the Division will take action and notify agencies when mandated timelines are missed.

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